



REGIONAL PARTNERSHIP GRANTS

GRANT PERIOD: 2017–2022

DELAWARE HEALTHY OUTCOMES WITH PARENT ENGAGEMENT (DE HOPE)

LEAD AGENCY: Children & Families First
Delaware

TARGET SERVICE AREA: Delaware

LOCATION: Wilmington, DE

**ADMINISTRATION FOR CHILDREN AND
FAMILIES REGION:** Region 2

CONGRESSIONAL DISTRICT SERVED: DE-01

BRIEF PROGRAM DESCRIPTION

PROGRAM DESCRIPTION: The Delaware Healthy Outcomes with Parent Engagement (DE HOPE) program offers a multidisciplinary team approach for pregnant women who seek or are enrolled in medication-assisted treatment (MAT) for opioid dependency. Services are provided throughout pregnancy and for up to 3 years after delivery to caregivers and their identified infants (with a contemporaneous control group of pregnant women receiving services as usual). A peer recovery coach and nurse home visitor (PRC/NHV) work as a team to assure engagement and maximize learning. Participating families also receive parenting skills training to further reinforce positive parenting behaviors while offering families group support to improve family well-being. The DE HOPE program uses three evidence-supported models: Healthy Families America Home Visiting, Peer Recovery Coaching, and Nurturing Parenting Program family skills, all of which are integrated to maximize the strengths of each model.

TARGET POPULATION: DE HOPE serves pregnant women who seek MAT or are enrolled in MAT during their pregnancy and for up to three years after delivery of their infant.

PROJECTED NUMBERS SERVED: The program is serving a total of 40 pregnant women and their infants with prenatal substance exposure over the 5-year grant period.

MAJOR PROGRAM GOALS

- GOAL 1:** Improve Child Well-Being
- GOAL 2:** Improve Permanency
- GOAL 3:** Enhance Safety
- GOAL 4:** Improve Adult/Family Recovery
- GOAL 5:** Improve Family Functioning & Stability
- GOAL 6:** Improve Adult Well-Being
- GOAL 7:** Increase Regional Partnership Capacity

KEY PROGRAM SERVICES

- Healthy Families America
- Nurturing Parenting Program
- Traditional Case Management
- Peer Recovery Coaching

PARNTER AGENCIES AND ORGANIZATIONS

- Department of Services to Children, Youth & Their Families/Division of Family Services
- Department of Health and Social Services/Division of Public Health
- Department of Health and Social Services/Division of Substance Abuse & Mental Health
- Connections Community Support Programs, Inc.
- Brandywine Counseling and Community Services
- Office of the Child Advocate
- Casey Family Programs
- Child Trends

EVALUATION DESIGN

The evaluation of Delaware Healthy Outcomes with Parent Engagement (HOPE) has an impact study, an implementation study, and a collaboration study. The grantee is also participating in the RPG cross-site evaluation studies of family and child outcomes, program implementation, and collaboration among RPG grantees and partners.

IMPACT STUDY DESIGN

The grantee is using a randomized controlled trial to examine the impact of its RPG services. The target population is pregnant women or mothers of infants seeking or already receiving MAT for opioid use disorder. All women enrolled in the study receive MAT and mental health counseling services.

Members of the treatment group receive the DE HOPE model, which pairs a Health Families America Family Support Specialist nurse home visitor with a peer recovery coach from one of the partner substance use disorder treatment providers. The nurse and coach work in tandem as a coordinated team. The nurse conducts home visits with the women. The peer recovery coach helps with case management (which may also include home visits either alone or with the nurse) and facilitates substance use disorder treatment. Women in the treatment group also receive the Nurturing Parenting Program, a group-based parenting skills model. They have access to services for up to three years after the birth of their baby.

Members of the control group receive business-as-usual services through one of two MAT providers. These services include access to either a peer recovery coach or care coordinator, as well as potential referrals to other community-based services. The duration of services for the control group is unknown.

The impact study includes 80 families, with 40 in the treatment group and 40 in the control group. The grantee is examining impacts in the following domains: permanency, safety, child well-being, family functioning, and recovery. Data sources include administrative data and information collected using standardized instruments. A research coordinator from Children and Families First collects data from both the treatment and control groups using standardized instruments. Data is collected eight times for each family (both treatment and control groups): at baseline, 6, 12, 18, 24, 30, 36 months after baseline; and when the woman's infant is 2–4 weeks old.

IMPLEMENTATION AND A COLLABORATION STUDY DESIGN

The implementation study is designed to examine the level of fidelity to the DE HOPE Model achieved and perceptions of participants regarding facilitators and barriers to implementation. The evaluation team conducts annual site visits to talk with participants and gather their impressions. The collaboration study entails evaluating the strength of the DE HOPE partnership and how this changes over time. Partners complete the Wilder Collaborative Factors Inventory annually and use the results to inform their work together and make changes in procedures, as needed.

SUSTAINABILITY STRATEGIES AND ACTIVITIES

Delaware has increased collaborative work to address the rise in the number of infants with prenatal substance exposure in the state through a Substance Exposed Infant Committee and an In-Depth Technical Assistance Team to provide a state structure to assure that the joint work, focus, and collaboration will continue during the grant period and beyond. These joint efforts provide an avenue for new recommendations of system changes to flow back to the various commissions who will make recommendations and reports to the Governor.

With documentation that the model is effective at improving outcomes for children and their families, the project anticipates having opportunities to realign available funding and be more competitive to attract new partners. Casey Family Programs continues to support the project as demonstrated by participation in the grant writing process as well as commitment to participation in the implementation process.

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